Q.C.
NH

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SM	71002	4/1/99
.I.P.E. CLASSIFIER	MW	5a	6/3/99
FORMALITY REVIEW	DM	72223	6-10-99

INDEX OF CLAIMS

✔ .... Rejected   N .... Non-elected
= .... Allowed   I .... Interference
— (Through numeral)... Canceled   A .... Appeal
÷ .... Restricted   O .... Objected

Claim Final	Original	Date 6 15 a	12 7 00	8 29 01	1 10 02	8 6 03								
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	2	✔				✔								
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**If more than 150 claims or 10 actions
staple additional sheet her**

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